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PTO/SB/05 (03-01)
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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. COTH-P01-001	
		First Inventor Noubar B. Afeyan	
		Title ADZYMES AND USES THEREOF	
		Express Mail Label No. EV323526858US	

APPLICATION ELEMENTS		ADDRESS TO: Commissioner for Patents Washington, DC 20231	
<small>See MPEP chapter 600 concerning utility patent application contents.</small>			
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 185] <small>(preferred arrangement set forth below)</small><ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 19]</p> <p>5. <input type="checkbox"/> Oath or Declaration [Total Pages] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p>		
ACCOMPANYING APPLICATIONS PARTS			
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other: </p>			
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____ <small>Prior application information: Examiner _____ Group / Art Unit: _____</small></p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>			
19. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		28120	
		or <input checked="" type="checkbox"/> Correspondence address below	
Name ROPES & GRAY LLP Matthew P. Vincent			
Address One International Place			
City Boston		State MA	Zip Code 02110-2624
Country US		Telephone (617) 951-7000	Fax (617) 951-7050
Name (Print/Type) John D. Quisel		Registration No. (Attorney/Agent) 47,874	
Signature 		Date August 27, 2003	

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV323526858US, in an envelope addressed to: Mail Stop Patent Application, Commissioner for Patents, Alexandria, VA 22313-1450, on the date shown below.

Dated: 8/27/03 Signature: Joanne Ryan (Joanne Ryan)

03916 U.S. PTO
10/680592

08/27/03

FEE TRANSMITTAL for FY 2003 <small>Patent fees are subject to annual revision.</small>		Complete if Known	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	Not Yet Assigned
TOTAL AMOUNT OF PAYMENT (\$) 375.00		Filing Date	August 27, 2003
		First Named Inventor	Noubar B. Afeyan
		Examiner Name	Not Yet Assigned
		Group Art Unit	N/A
		Attorney Docket No.	COTH-P01-001

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																																																																																																																																																
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 18-1945 Deposit Account Name: Ropes & Gray LLP The Commissioner is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	3. 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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV32352685BUS, in an envelope addressed to: Mail Stop Patent Application, Commissioner for Patents, PO Box 1450, Alexandria, VA 2231301450, on the date shown below.

Dated: 8/27/03 Signature: Joanne Ryan (Joanne Ryan)